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APPLICANTS

Hitomi Watanabe, Shinjuku-ku, JAPAN;

Makoto Honda, Shinjuku-ku, JAPAN;

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Verified and Acknowledged Examiner's Signature <i>SA</i>	Initials				

ADDRESS

6160
 PARKHURST & WENDEL, L.L.P.
 1421 PRINCE STREET
 SUITE 210
 ALEXANDRIA, VA
 22314-2805

TITLE

Fresnel lens sheet and rear projection screen

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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